RADIOISOTOPE POWER SYSTEMS

RPS Dose Estimation Tool Access Request and Usage Agreement

Form Overview

This form shall be filled out by an individual requesting access to the RPS-Dose Estimation Tool. Completion of this form will initiate the applicant review process, which determines whether the applicant meets the access requirements.

One individual per organization may be granted access to the software application. This individual may share the data with their qualified colleagues, in accordance with the limitations of the RPS-DET Usage Agreement. This organization may not share or distribute the software application to any external parties. **Please note that data can only be shared with fellow U.S. mission planners (per the Usage Agreement).** The definition of "organization" is subject to the discretion of the RPS Program and DOE.

Submission Instructions

This form shall be submitted to the RPS Program Office, at NASA-RPS@mail.nasa.gov.

Section I: Requestor Affirmation

I am requesting a copy of the RPS Dose Estimation Tool. I affirm the following:

- 1) I am a US Citizen or a lawful permanent resident of the U.S., (If a lawful permanent resident, verification of the law permanent resident status must be presented to the RPS Program Office)
- 2) I am currently a United States RPS mission concept or technology developer,
- 3) I currently work for an organization incorporated or headquartered within the United States

Section II: Requestor Information

First Name	Middle Initial	Last Name				
Organization or Employe	er					
Professional Job or Role						
Professional Email		Professional Phone				
NASA Identity Status	[] I have an active	[] I have previously had	[] I do not have a			
	NASA Identity	a NASA Identity	NASA Identity			
In the field below, briefly details of the end-use and	or's Intended Use Staten describe why your organization allysis you intend to perform. (Plation when requesting RPS-DET	on requires access to the RPS I lease make a note of your entry				

Section IV:	Requestor's Signature			
	, am requesting the RPS Dose Estimation Tool on behalf of			
	y organization's Point of Contact for the my organization could be redirected from	e RPS Dose Estimation Tool, and I understand that requests m the RPS Program Office to me.		
Signature _		Date		
	(Original Signature Required; a scann	ed copy may be submitted)		
	RADIOISOTOPE	POWER SYSTEMS		
RF	PS-Dose Estimation Too	l (RPS-DET) Usage Agreement		
Program, in pa Energy (DOE opportunity to objectives of t	artnership with the Office of Space a), is offering mission concept or tecl of access the Radioisotope Power Sys	ion (NASA) Radioisotope Power Systems (RPS) and Defense Power Systems at the Department of hnology developers, researchers, or analysts the stems Dose Estimation Tool software application. The ential implementation of RPS in mission concepts I development.		
Some data be	sing provided has been determined to	be export controlled.		
	_	ing the above-mentioned technical data on behalf of (Name of Organization). In requesting		
	data, I certify that:	(
org res	ganization/company has a need for the d	ermanent resident of the United States and that I and my above-mentioned technical data, (If a lawful permanent t resident status must be presented to the RPS Program		
(2) I w	ork for an organization/company that i	s incorporated to do business in the United States, and,		
(3) I a	nd my organization/company agree to c	abide by the following ITAR or EAR statement:		

"International Traffic in Arms Regulations (ITAR) Notice"

This document contains information which falls under the purview of the U.S. Munitions List (USML) as defined in the International Traffic in Arms Regulations (ITAR), 22 CFR §120-130, and is export-controlled. It shall not be transferred to foreign persons in the U.S. or abroad without specific approval of a knowledgeable NASA export control official, and/or unless an export license or license exemption is obtained/available from the Directorate of Defense Trade Controls, United States Department of State. Violations of these regulations are punishable by fine, imprisonment, or both.

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Signature			Date		
	Original Signature Required; a scanned copy may be submitted)				
Please type or print cle	early.				
Name:					
Professional Title:					
Organization:					
Professional Address:					
City:		State:	Zip Code:		
Professional Phone:					
Professional E-Mail:					

Return form to:

NASA-RPS@mail.nasa.gov, Subject line labeled: REQUEST: RPS-DET Access